

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

Eastern District of New York

Case number (if known): \_\_\_\_\_

Chapter you are filing under:

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

☐ Check if this is an  
amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

6/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Barbara

First name

J.

Middle name

Abadi

Last name

Suffix (Sr., Jr., II, III)

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names and any assumed, trade names and doing business as names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 6 4 5 5

OR

9 xx - xx - \_\_\_\_\_

xxx - xx - \_\_\_\_\_

OR

9 xx - xx - \_\_\_\_\_

Debtor 1

Barbara J. Abadi

First Name Middle Name Last Name

Case number (if known)

**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****4. Your Employer****Identification Number (EIN), if any.**

EIN

EIN

EIN

EIN

EIN

EIN

EIN

EIN

**5. Where you live**

Rikers Island Jail Complex

Number Street

19-19 Hazen St., Rose M. Singer Center

East Elmhurst

NY

11370

City

State ZIP Code

Queens County

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

3438 E. Lake Road

Number Street

Suite 14, Box 643

P.O. Box

Palm Harbor

FL

34685

City

State ZIP Code

**If Debtor 2 lives at a different address:**

Number Street

City

State ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City

State ZIP Code

**6. Why you are choosing this district to file for bankruptcy***Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

*Check one:*

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

**8. How you will pay the fee**

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

☒ No  
☐ Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

☒ No  
☐ Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
 Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

**11. Do you rent your residence?**

☒ No. Go to line 12.  
☐ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.  
☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Barbara J. Abadi

First Name

Middle Name

Last Name

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor****12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☐ No. Go to Part 4.☒ Yes. Name and location of business

Barbara Abadi

Name of business, if any

3438 East Lake Road

Number Street

Suite 14

Palm Harbor

City

FL

State

34685

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))☒ None of the above**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

☒ No☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Debtor 1

Barbara J. Abadi

First Name

Middle Name

Last Name

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

You must check one:

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

You must check one:

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes****16. What kind of debts do you have?**

**16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☒ No. Go to line 16b.  
☐ Yes. Go to line 17.

**16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.  
☒ Yes. Go to line 17.

**16c. State the type of debts you owe that are not consumer debts or business debts.**

**17. Are you filing under Chapter 7?**

☐ No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  
☒ No  
☐ Yes

**18. How many creditors do you estimate that you owe?**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

**19. How much do you estimate your assets to be worth?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000                  | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input checked="" type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000           | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million         | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**20. How much do you estimate your liabilities to be?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000          | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000    | <input type="checkbox"/> \$10,000,001-\$50 million           | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million          | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million         | <input type="checkbox"/> More than \$50 billion        |

**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Barbara J. Abadi

Signature of Debtor 1

Executed on 07/11/2024

MM / DD / YYYY

**X**

Jennifer Polich

DocuSigned by:

13B264F888664D2

Signature of Debtor 2

July 11, 2024 | 1:14 PM EDT

Executed on

MM / DD / YYYY

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

☒ /s/ Douglas Pick \_\_\_\_\_ Date 07/11/2024  
 Signature of Attorney for Debtor MM / DD / YYYY

Douglas Pick  
 Printed name

Pick & Zabicki LLP  
 Firm name

369 Lexington Avenue  
 Number Street

12th Floor

New York City NY 10017  
 City State ZIP Code

Contact phone (212) 695-6000 Email address dpick@picklaw.net

1743996 NY  
 Bar number State

## Fill in this information to identify your case:

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
 (If known)

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

## Part 1: Summarize Your Assets

	<b>Your assets</b> Value of what you own
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$ 0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$ 70,028.67
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$ 70,028.67

## Part 2: Summarize Your Liabilities

	<b>Your liabilities</b> Amount you owe
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$ 131,872.00
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ 36,349.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	+ \$ 8,813,475.54
<b>Your total liabilities</b>	\$ 8,981,696.54

## Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ 3,542.34
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ 3,645.00



Debtor 1 **Barbara Abadi**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ \_\_\_\_\_

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

**Total claim**

**From Part 4 on *Schedule E/F*, copy the following:**

- 9a. Domestic support obligations (Copy line 6a.) \$ \_\_\_\_\_
- 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ \_\_\_\_\_
- 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ \_\_\_\_\_
- 9d. Student loans. (Copy line 6f.) \$ \_\_\_\_\_
- 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ \_\_\_\_\_
- 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ \_\_\_\_\_
- 9g. **Total.** Add lines 9a through 9f. \$ \_\_\_\_\_



Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No  
☐ Yes. Describe...

**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No  
☐ Yes. Describe...

**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No  
☐ Yes. Describe...

**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No  
☒ Yes. Describe...

Coats and clothing in New York  
 2 Fur Coats at Friends Apartment in Florida

\$ 3,500.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver

- ☒ No  
☐ Yes. Describe...

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses

- ☒ No  
☐ Yes. Describe...

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- ☒ No  
☐ Yes. Give specific information...

**15. Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here.....>**\$ 54,215.00**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☐ No  
☒ Yes..... Cash ..... \$ 100.00

**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No  
☒ Yes.....

Institution name:		
17.1. Checking account:	TD Bank (#5604) (Joint With Husband) (Restrained)	\$ <u>10,697.13</u>
17.2. Checking account:	Citibank (#0990)	\$ <u>3,500.00</u>

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples: Bond funds, investment accounts with brokerage firms, money market accounts*

- ☒ No  
☐ Yes.....

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ☒ No  
☐ Yes. Give specific information about them.....

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  
 Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them.....

**21. Retirement or pension accounts**

*Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans*

- ☐ No  
☒ Yes. List each account separately

Type of account Institution name

Pension plan: JPMorgan Chase Pension \$ 816.54

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others*

- ☐ No  
☒ Yes..... Institution name or individual:

Other Security Deposit With U-Haul Moving and Storage \$ 150.00

Other Security Deposit With Manhattan Mini Storage \$ 550.00

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

- ☒ No  
☐ Yes.....

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No  
☐ Yes.....

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No  
☐ Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples: Internet domain names, websites, proceeds from royalties and licensing agreements*

- ☒ No  
☐ Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

*Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses*

- ☒ No  
☐ Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

Federal: \$ 0.00  
 State: \$ 0.00  
 Local: \$ 0.00

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No  
☐ Yes. Give specific information....

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information....

**31. Interests in insurance policies**

- ☒ No  
☐ Yes. Name the insurance company of each policy and list its value....

**32. Any interest in property that is due you from someone who has died**

- ☒ No  
☐ Yes. Give specific information....

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

- ☒ No  
☐ Yes. Give specific information....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Give specific information....

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information...

**36. Add the dollar value of the portion you own for all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....>**

**\$15,813.67**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
 If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

- ☒ No  
☐ Yes. Give specific information...

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....>**

**\$0.00**

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....>		\$0.00
56. Part 2: Total vehicles, line 5	\$ 0.00	
57. Part 3: Total personal and household items, line 15	\$ 54,215.00	
58. Part 4: Total financial assets, line 36	\$ 15,813.67	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	+ \$ 0.00	
62. Total personal property. Add lines 56 through 61 .....	\$ 70,028.67	Copy personal property total▶
63. Total of all property on Schedule A/B. Add line 55 + line 62		+ \$ 70,028.67
		\$ 70,028.67

<b>DATE</b>	<b>ABADI NY STORAGE</b>	<b>EST. SALE PRICE</b>	
6/16/2024	Dishes, Glassware, Cups	\$2,200.00	
	Cutlery & Serving Pieces	\$2,000.00	
	Platters & Trays	\$1,500.00	
	Silver Tea Set	\$500.00	
	Silver Pitchers	\$600.00	
			\$6,800.00
	Bed Frame	\$500.00	
	Dining Table	\$2,000.00	
	2 Breuer Chairs	\$400.00	
	Low Sofa, Seat, Ottoman	\$1,000.00	
	Wooden Couch w/Cushions	\$1,000.00	
	Mirror	\$700.00	
	2 Light Fixtures	\$1,500.00	
	2 Sconces	\$500.00	
	Room Divider	\$500.00	
	1 Console Cabinet	\$1,000.00	
			\$9,100.00
	Books & Miscellaneous		\$1,500.00
	Coats & Clothing		\$1,500.00
	<b>TOTAL NY</b>		<b>\$18,900.00</b>

#### **ABADI FLORIDA STORAGE**

2 Queen Bed Frames (+ Mattresses)	\$100.00	
2 End Tables - Round & Square	\$750.00	
2 Table Lamps	\$120.00	
2 Rattan Chairs	\$300.00	
6 Dining Chairs - Poor Condition	\$300.00	
1 Walmart Dining Table	\$100.00	
1 Ikea Sofabed - Poor Condition	\$50.00	
1 Folding Cart w/Wheels	\$150.00	
1 Standup Rolling Desk	\$100.00	
1 Desk	\$125.00	
1 Glass Top Desk/Table	\$750.00	
1 Small Chair	\$300.00	
2 Ikea Bookcases	\$80.00	
2 Rugs	\$800.00	
Miscellaneous - Kitchen & Objects & Clothing	\$2,000.00	\$6,025.00

2 Fur Coats at Friends Apartment

\$2,000.00

**TOTAL FLORIDA****\$8,025.00**

<b>DATE</b>	<b>ARGENTINA</b>	<b>EST SALE PRICE</b>
6/16/2024	Entry Dresser	\$1,000.00
	Round Table	\$700.00
	Round End Table	\$700.00
	Wooden Bench w/Cushion	\$1,000.00
	4 Couches - Worn	\$2,000.00
	1 Coffee Table	\$500.00
	1 Small Chaise	\$700.00
	2 Chairs	\$1,500.00
	1 Mirror	\$700.00
	1 Bookcase	\$1,500.00
	2 Large Rugs - 1 Poor Condition/1 Excellent Condition	\$3,000.00
	2 Large Storage Cabines	\$1,250.00
	1 Narrow Table	\$500.00
	2 Kitchen Tables	\$700.00
	8 Chairs- Poor Condition	\$200.00
	1 Recliner	\$700.00
	1 Wardrobe	\$300.00
	1 Dresser	\$1,000.00
	3 Queen Beds	\$1,500.00
	1 Small Couch w/2 Chairs	\$600.00
	2 Bedside Tables	\$600.00
	2 Swivel Bookcases	\$1,000.00
	1 Rolling Desk & 2 Small Desks	\$350.00
	1 Desk Chair	\$50.00
	1 Small Coffee Table	\$200.00
	1 Tall Bookcase	\$150.00
	2 Toy Cabinets	\$40.00
	6 Table Lamps	\$750.00
	2 Floor	\$100.00
	Kitchen Dishes & Cooking Equipment & Cutlery	\$2,000.00
	Miscellaneous Bedding & Objects	\$2,000.00
	<b>TOTAL ARGENTINA</b>	<b>\$27,290.00</b>
<b>TOTAL NY, FL, ARG = ESTIMATED SALE PRICE</b>		<b>\$56,215.00</b>



## Fill in this information to identify your case:

Debtor 1	Barbara J. Abadi		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of New York			
Case number (If known)			

☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: See Attachment - Furniture, Dishware, Clothing, Books and Misc. Personal Items in New York Storage Unit (#1-13-8) (Stored Within 1 Year)	\$ 17,400.00	<input checked="" type="checkbox"/> \$ 11,375.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205
Line from <i>Schedule A/B</i> : 6 Brief description: Clothing - Coats and clothing in New York	\$ 1,500.00	<input checked="" type="checkbox"/> \$ 1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205(a)(5)
Line from <i>Schedule A/B</i> : 11 Brief description: Clothing - 2 Fur Coats at Friends Apartment in Florida	\$ 2,000.00	<input checked="" type="checkbox"/> \$ 2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205(a)(5)

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor

**Barbara J. Abadi**

First Name

Middle Name

Last Name

Case number (if known)

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
TD Bank (#5604) (Joint With Husband) (Restrained) (Checking Account) Brief description: Line from Schedule A/B: 17.1	\$10,697.13	<input checked="" type="checkbox"/> \$ 10,697.13 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. Debt. & Cred. Law § 282 (2)(a)
Citibank (#0990) (Checking Account) Brief description: Line from Schedule A/B: 17.2	\$3,500.00	<input checked="" type="checkbox"/> \$ 3,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. Debt. & Cred. Law § 282 (2)(a)
JPMorgan Chase Pension Brief description: Line from Schedule A/B: 21	\$816.54	<input checked="" type="checkbox"/> \$ 816.54 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. CPLR § 5205 (c) N.Y. Debt. & Cred. Law § 282 (2)(e)
Security Deposit With U-Haul Moving and Storage (Security Deposits or Prepayments) Brief description: Line from Schedule A/B: 22	\$150.00	<input checked="" type="checkbox"/> \$ 150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. CPLR § 5205 (g)
Security Deposit With Manhattan Mini Storage (Security Deposits or Prepayments) Brief description: Line from Schedule A/B: 22	\$550.00	<input checked="" type="checkbox"/> \$ 550.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. CPLR § 5205 (g)
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

## Fill in this information to identify your case:

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) \_\_\_\_\_  
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
 (if known)

☐ Check if this is  
an amended  
filing

## Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	---	---

**2.1**Describe the property that secures the claim: \$ 131,872.00 \$ 10,697.13 \$ 121,174.87

Brown Rudnick LLP  
 Creditor's Name

7 Times Square

Number Street  
 New York NY 10036

City State ZIP Code

**Who owes the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

☐ Check if this claim relates to a  
community debt

Date debt was incurred \_\_\_\_\_

As of the date you file, the claim is: Check all  
that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or  
secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☒ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 131,872.00

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

## Fill in this information to identify your case:

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) \_\_\_\_\_  
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
 (if know)

☐ Check if this is  
 an amended  
 filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.  
☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

**2.1** NYS Dept. of Taxation and Finance  
 Priority Creditor's Name  
Bankruptcy/Special Procedures Section  
 Number Street  
P.O. Box 5300  
Albany NY 12205  
 City State ZIP Code  
**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
**Is the claim subject to offset?**  
☒ No  
☐ Yes

Last 4 digits of account number

When was the debt incurred? 2020

\$ 36,349.00	\$ 36,349.00	\$ 0.00
--------------	--------------	---------

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of PRIORITY unsecured claim:**

- ☐ Domestic support obligations  
☒ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing else to report in this part. Submit to the court with your other schedules.  
☒ Yes. Fill in all of the information below.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim**

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

4.1	<b>American Express</b> Nonpriority Creditor's Name 200 Vesey Street Number Street New York NY 10285 City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ <u>1,750.25</u>
4.2	<b>Conor and Eavan O'Driscoll</b> Nonpriority Creditor's Name 355 Locust Avenue Number Street Rye NY 10580 City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan	\$ <u>49,000.00</u>
4.3	<b>Francis Guthman</b> Nonpriority Creditor's Name Number Street Buenos Aires, Argentina City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loans	\$ <u>25,000.00</u>

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**4.4** Honeedew Investing LLC  
 Nonpriority Creditor's Name  
c/o Medina Law Firm LLC  
 Number 641 Street Lexington Ave., 13th Fl.  
New York NY 10022  
 City State ZIP Code  
**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
**Is the claim subject to offset?**  
☒ No  
☐ Yes

**Last 4 digits of account number** \_\_\_\_\_  
**When was the debt incurred?** \_\_\_\_\_  
**\$ 8,414,046.00**

**As of the date you file, the claim is:** Check all that apply.  
☐ Contingent  
☒ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Judgment plus interest from 5/17/17

**4.5** Jennifer Polich  
 Nonpriority Creditor's Name  
1457 East Lake Woodlands Pkwy  
 Number New York NY Street 10174  
 City State ZIP Code  
**Who owes the debt?** Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
**Is the claim subject to offset?**  
☒ No  
☐ Yes

**Last 4 digits of account number** \_\_\_\_\_  
**When was the debt incurred?** \_\_\_\_\_  
**\$ 74,493.00**

**As of the date you file, the claim is:** Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Personal Loans

**4.6** Liston Abramson LLP  
 Nonpriority Creditor's Name  
405 Lexington Avenue  
 Number 46th Floor Street  
New York NY 10174  
 City State ZIP Code  
**Who owes the debt?** Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
**Is the claim subject to offset?**  
☒ No  
☐ Yes

**Last 4 digits of account number** \_\_\_\_\_  
**When was the debt incurred?** \_\_\_\_\_  
**\$ 235,196.29**

**As of the date you file, the claim is:** Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Legal Fees

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**4.7** TD Bank Visa  
Nonpriority Creditor's Name  
P.O. Box 100290  
Number Street  
Columbia SC 29202  
City State ZIP Code

**Last 4 digits of account number** \$ 13,990.00  
**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Who owes the debt?** Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Credit Card Debt

**Is the claim subject to offset?**  
☒ No  
☐ Yes

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

NYS Dept. of Taxation and Finance  
Creditor's Name  
Civil Enforcement Division  
Number Street  
WA Harriman Campus  
Albany NY 12227  
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim

<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a. \$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>36,349.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <div style="border: 1px solid black; padding: 2px;">\$ <u>36,349.00</u></div>

Total claim

<b>Total claims from Part 2</b>	6f. Student loans	6f. \$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <u>8,813,475.54</u>
	6j. Total. Add lines 6f through 6i.	6j. <div style="border: 1px solid black; padding: 2px;">\$ <u>8,813,475.54</u></div>







Debtor

Barbara J. Abadi

First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**3.5**Carlos Abadi

Name

3438 E. Lake Road Suite 14, Box 643

Street

Palm Harbor

FL

34685

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_☒ Schedule E/F, line 2.1☐ Schedule G, line \_\_\_\_\_

## Fill in this information to identify your case:

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number  
 (If known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Employment

## 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

## Employment status

- ☐ Employed  
☒ Not employed

- ☐ Employed  
☒ Not employed

## Occupation

## Employer's name

## Employer's address

Number Street

Number Street

City State ZIP Code

City State ZIP Code

## How long employed there?

## Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

	For Debtor 1	For Debtor 2 or non-filing spouse
2.	\$ 0.00	\$ 0.00

3. Estimate and list monthly overtime pay.

3.	+\$ 0.00	+\$ 0.00
----	----------	----------

4. Calculate gross income. Add line 2 + line 3.

4.	\$ 0.00	\$ 0.00
----	---------	---------

Debtor 1

Barbara J. Abadi

First Name Middle Name Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$ 0.00	\$ 0.00
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$ 0.00
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 2,725.80	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 816.54	\$ 0.00
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 3,542.34	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,542.34	\$ 0.00
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____	11. + \$ _____	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ 3,542.34	
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		Combined monthly income

**Fill in this information to identify your case:**

Debtor 1	Barbara J. Abadi		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of New York			
(State)			
Case number (If known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

**2. Do you have dependents?**☒ No☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**☒ No☐ Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I).

**4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 0.00

**If not included in line 4:**

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

### Your expenses

- |  |      |    |               |
|--|------|----|---------------|
| 5. <b>Additional mortgage payments for your residence</b> , such as home equity loans  | 5.   | \$ | <u>0.00</u>   |
| <b>6. Utilities:</b>   |      |    |               |
| 6a. Electricity, heat, natural gas   | 6a.  | \$ | <u>0.00</u>   |
| 6b. Water, sewer, garbage collection   | 6b.  | \$ | <u>0.00</u>   |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.  | \$ | <u>150.00</u> |
| 6d. Other. Specify: _____  | 6d.  | \$ | <u>0.00</u>   |
| 7. <b>Food and housekeeping supplies</b>   | 7.   | \$ | <u>800.00</u> |
| 8. <b>Childcare and children's education costs</b>   | 8.   | \$ | <u>0.00</u>   |
| 9. <b>Clothing, laundry, and dry cleaning</b>  | 9.   | \$ | <u>100.00</u> |
| 10. <b>Personal care products and services</b>   | 10.  | \$ | <u>200.00</u> |
| 11. <b>Medical and dental expenses</b>   | 11.  | \$ | <u>200.00</u> |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12.  | \$ | <u>200.00</u> |
| 13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13.  | \$ | <u>0.00</u>   |
| 14. <b>Charitable contributions and religious donations</b>  | 14.  | \$ | <u>0.00</u>   |
| <b>15. Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |      |    |               |
| 15a. Life insurance  | 15a. | \$ | <u>0.00</u>   |
| 15b. Health insurance  | 15b. | \$ | <u>405.00</u> |
| 15c. Vehicle insurance   | 15c. | \$ | <u>0.00</u>   |
| 15d. Other insurance. Specify: _____   | 15d. | \$ | <u>0.00</u>   |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: <u>NYS Taxes Per Payment Plan</u>                                | 16.  | \$ | <u>750.00</u> |
| <b>17. Installment or lease payments:</b>  |      |    |               |
| 17a. Car payments for Vehicle 1  | 17a. | \$ | <u>0.00</u>   |
| 17b. Car payments for Vehicle 2  | 17b. | \$ | <u>0.00</u>   |
| 17c. Other. Specify: _____   | 17c. | \$ | <u>0.00</u>   |
| 17d. Other. Specify: _____   | 17d. | \$ | <u>0.00</u>   |
| 18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b> | 18.  | \$ | <u>0.00</u>   |
| 19. <b>Other payments you make to support others who do not live with you.</b><br>Specify: _____   | 19.  | \$ | <u>0.00</u>   |
| <b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |      |    |               |
| 20a. Mortgages on other property   | 20a. | \$ | <u>0.00</u>   |
| 20b. Real estate taxes   | 20b. | \$ | <u>0.00</u>   |
| 20c. Property, homeowner's, or renter's insurance  | 20c. | \$ | <u>0.00</u>   |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. | \$ | <u>0.00</u>   |
| 20e. Homeowner's association or condominium dues   | 20e. | \$ | <u>0.00</u>   |

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: Storage Charges

Mailbox Rental

21. +\$ 820.00  
 +\$ 20.00  
 +\$ \_\_\_\_\_

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 3,645.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$ \_\_\_\_\_  
 22c. \$ 3,645.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 3,542.34

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 3,645.00

23c. Subtract your monthly expenses from your monthly income.  
 The result is your *monthly net income*.

23c. \$ -102.66

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

**Fill in this information to identify your case:**

Debtor 1	Barbara J. Abadi		
	First Name	Middle Name	Last Name

Debtor 2 (Spouse, if filing)			
First Name	Middle Name	Last Name	

United States Bankruptcy Court for the Eastern District of New York

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

## Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

**If two married people are filing together, both are equally responsible for supplying correct information.**

**You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Sign Below**

**Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?**

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

**Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.**

**x** /s/ Barbara J. Abadi

**Signature of Debtor 1**

Date 07/11/2024  
MM / DD / YYYY

-DocuSigned by:

x Jennifer Polich  
13D261E8898C4D2

**Signature of Debtor 2**

Date July 11, 2024 | 1:14 PM EDT  
MM / DD / YYYY



Fill in this information to identify your case:

Debtor 1 Barbara J. Abadi  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) \_\_\_\_\_  
 First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
 (if know)

☐ Check if this is  
 an amended  
 filing

## Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Give Details About Your Marital Status and Where You Lived Before

## 1. What is your current marital status?

- ☒ Married
- ☐ Not married

## 2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
- ☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1  
lived there

Debtor 2:

Dates Debtor 2  
lived there

Buenos Aires, Argentina

Number Street

City State ZIP Code

From 01/01/2022  
To 03/31/2022☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

Tampa, Florida

Number Street

City State ZIP Code

From 04/01/2022  
To 10/31/2022

Buenos Aires, Argentina

Number Street

City State ZIP Code

From 11/01/2022  
To 03/31/2023

3438 E. Lake Road

Number Street  
Suite 14

Palm Harbor FL 34685

City State ZIP Code

From 04/01/2023  
To 04/30/2023

New York

Number Street

City State ZIP Code

From 05/01/2023  
To 06/30/2023

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

3438 E. Lake Road

Number Street  
Suite 14

Palm Harbor FL 34685

City State ZIP Code

From 07/01/2023  
To 08/31/2023☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

From \_\_\_\_\_  
To \_\_\_\_\_

Buenos Aires, Argentina

Number Street

City State ZIP Code

From 09/01/2023  
To 10/31/2023☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

From \_\_\_\_\_  
To \_\_\_\_\_

3438 E. Lake Road

Number Street  
Suite 14

Palm Harbor FL 34685

City State ZIP Code

From 11/01/2023  
To 12/31/2023☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

From \_\_\_\_\_  
To \_\_\_\_\_

Buenos Aires, Argentina

Number Street

City State ZIP Code

From 01/01/2024  
To 04/30/2024☐ Same as Debtor 1☐ Same as Debtor 1

Number Street

City State ZIP Code

From \_\_\_\_\_  
To \_\_\_\_\_

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H)**Part 2: Explain the Sources of Your Income**

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No☒ Yes. Fill in the details.

From January 1 of current year until the date you filed for bankruptcy:

**Debtor 1**Sources of income  
Check all that applyGross income  
(before deductions and exclusions)☐ Wages, commissions, bonuses, tips \$ 9,174.00☒ Operating a business

For last calendar year:

(January 1 to December 31, 2023)

☒ Wages, commissions, bonuses, tips \$ 15,797.00☒ Operating a business

For the calendar year before that:

(January 1 to December 31, 2022)

☐ Wages, commissions, bonuses, tips \$ 10,062.00☒ Operating a business**Debtor 2**Sources of income  
Check all that applyGross income  
(before deductions and exclusions)☐ Wages, commissions, bonuses, tips \$ \_\_\_\_\_☐ Operating a business☐ Wages, commissions, bonuses, tips \$ \_\_\_\_\_☐ Operating a business☐ Wages, commissions, bonuses, tips \$ \_\_\_\_\_☐ Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Pension	\$ 5,715.00		
	Social Security	\$ 19,075.00		
For last calendar year:	Pension	\$ 34,327.00		
(January 1 to December 31, 2023)	Social Security	\$ 33,656.00		
For the calendar year before that:	Social Security	\$ 30,946.00		
(January 1 to December 31, 2022)				

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☒ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**  
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?** *Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No.☐ Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

☒ No.☐ Yes. List all payments that benefited an insider.**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No☒ Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title: Honeedew Investing Limited v. Carlos Abadi and Barbara Abadi Case number: <u>652654/2017</u>	Post-Judgment Enforcement/Collection  Supreme Court of the State of NY Court Name New York County Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title: Brown Rudnick LLP v. Barbara Abadi, et al. Case number: <u>24002927-CV-32</u>	Debt Collection  Florida Circuit Court Court Name Miami Dade County Number Street City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

☐ No. Go to line 11.☒ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Honeedew Investing LLC Creditor's Name c/o Medina Law Firm LLC Number Street 641 Lexington Ave., 13th Fl. New York NY 10022	10% Garnishment of 2024 Income  Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input checked="" type="checkbox"/> Property was attached, seized, or levied.	01/2024	\$ Unknown
Brown Rudnick LLP Creditor's Name 7 Times Square Number Street New York NY 10036 City State ZIP Code	Restraint on Joint Bank Account at TD Bank (#5604)  Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input checked="" type="checkbox"/> Property was attached, seized, or levied.	06/2024	\$ 10,697.13

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**☒ No☐ Yes. Fill in the details**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**☒ No☐ Yes**Part 5: List Certain Gifts and Contributions****13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**☒ No☐ Yes. Fill in the details for each gift.

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

- ☒ No
- ☐ Yes. Fill in the details for each gift or contribution.

**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

- ☒ No
- ☐ Yes. Fill in the details.

**Part 7: List Certain Payments or Transfers****16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
- ☒ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
\$7,500 Flat Fee Inclusive of Filing Fee - \$12,500 Refundable Retainer for Contested Matters (If Any)		07/09/2024	\$ 7,500.00
Pick & Zabicki LLP		07/09/2024	\$ 12,500.00
Person Who Was Paid			
Number Street			
City State ZIP Code			
Email or website address			
Jennifer Polich			
Person Who Made the Payment, if Not You			

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

- ☒ No
- ☐ Yes. Fill in the details.

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
- ☐ Yes. Fill in the details.

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

- ☒ No
- ☐ Yes. Fill in the details.

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units****20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
- ☐ Yes. Fill in the details.

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No  
☒ Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Manhattan Mini Storage

Name of Storage Facility

Name

See Attachment - Furniture, Dishware, Clothing, Books and Misc. Personal Items in New York Storage Unit (#1-13-8), \$17,400.00

- ☐ No  
☒ Yes

420 East 62nd Street

Number Street

Number Street

New York NY 10065

City State ZIP Code

City State ZIP Code

U-Haul Moving &amp; Storage

Name of Storage Facility

Name

See Attachment - Furniture, Kitchen Items, Clothing, and Misc. Personal Items in Florida Storage Unit (#1285), \$6,025.00

- ☐ No  
☒ Yes

11401 West Hills Borough Ave.

Number Street

Number Street

Tampa FL 33635

City State ZIP Code

City State ZIP Code

### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

### Part 11: Give Details About Your Business or Connections to Any Business

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation
- ☐ No. None of the above applies. Go to Part 12.
- ☒ Yes. Check all that apply above and fill in the details below for each business.

Barbara Abadi  
 Business Name  
3438 East Lake Road  
 Number Street  
Suite 14, Box 643  
Palm Harbor FL 34685  
 City State ZIP Code

**Describe the nature of the business**

Consulting

**Name of accountant or bookkeeper**

**Employer Identification number**  
**Do not include Social Security number or ITIN.**

EIN: 1 2 - 3 4 5 6 7 8 9

**Dates business existed**

From 01/01/2024 To Current

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

- ☒ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

DocuSign Envelope ID: 1588A54C-C906-4D89-B4CE-F5589E5CA463

Debtor Barbara J. Abadi  
First Name Middle Name Last Name

Case number(if known) \_\_\_\_\_

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Barbara J. Abadi

Signature of Debtor 1

Date 07/11/2024

X

Jennifer Polich

Signature of Debtor 2

Date July 11, 2024 | 1:14 PM EDT

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No☐ Yes. Name of person \_\_\_\_\_

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).





DocuSign Envelope ID: 1588A54C-C906-4D89-B4CE-F5589E5CA463

Debtor Barbara J. Abadi

Case number(if known) \_\_\_\_\_

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

✕ /s/ Barbara J. Abadi  
Signature of Debtor 1

Date 07/11/2024  
MM/DD/YYYY

DocuSigned by:  
Jennifer Polich  
✕ 13D261F8898C4D2  
Signature of Debtor 2

Date 07/11/2024  
MM/DD/YYYY

## Fill in this information to identify your case:

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
 (If known)

## Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

## Official Form 122A-1

## Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

## Part 1: Calculate Your Current Monthly Income

## 1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☒ Married and your spouse is NOT filing with you. You and your spouse are:
- ☒ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ _____	\$ _____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ _____	\$ _____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ _____	\$ _____
5. Net income from operating a business, profession, or farm	Debtor 1 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from a business, profession, or farm \$ _____	Debtor 2 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from a business, profession, or farm \$ _____
	Copy here →	\$ _____
6. Net income from rental and other real property	Debtor 1 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from rental or other real property \$ _____	Debtor 2 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from rental or other real property \$ _____
	Copy here →	\$ _____
7. Interest, dividends, and royalties	\$ _____	\$ _____

Debtor 1 **Barbara J. Abadi**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \_\_\_\_\_ ↓

For you \_\_\_\_\_ \$ \_\_\_\_\_

For your spouse \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

- 9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ \_\_\_\_\_

\$ \_\_\_\_\_

- 10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_  
 \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Total amounts from separate pages, if any.

+ \$ \_\_\_\_\_

+ \$ \_\_\_\_\_

- 11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ \_\_\_\_\_

+

\$ \_\_\_\_\_

= \$ \_\_\_\_\_

Total current  
monthly income

**Part 2: Determine Whether the Means Test Applies to You**

- 12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11. \_\_\_\_\_ Copy line 11 here →

\$ \_\_\_\_\_

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$ \_\_\_\_\_

- 13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

\_\_\_\_\_

Fill in the number of people in your household.

\_\_\_\_\_

Fill in the median family income for your state and size of household. \_\_\_\_\_ 13.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

\$ \_\_\_\_\_

- 14. How do the lines compare?**

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Debtor 1 Barbara J. Abadi  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

☒ /s/ Barbara J. Abadi

Signature of Debtor 1

Date 07/11/2024

MM / DD / YYYY

☒

Jennifer Polich

Signature of Debtor 2

Date July 11, 2024 | 1:14 PM EDT

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.



B2030 (Form 2030) (12/15)

## United States Bankruptcy Court

Eastern District of New York

In re Barbara J. Abadi

Case No. \_\_\_\_\_

Debtor

Chapter 7

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

☒ FLAT FEE

For legal services, I have agreed to accept ..... \$ 7,500.00  
 Prior to the filing of this statement I have received. .... \$ 7,500.00  
 Balance Due. .... \$ 0.00

☒ RETAINER

For legal services, I have agreed to accept a retainer of ..... \$ 12,500 -  
 The undersigned shall bill against the retainer at an hourly rate of ..... \$ 515 -

REFUNDABLE  
FOR COURTROOM  
MATTERS, IF ANY

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify) Jennifer Polich

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  
Representation of the Debtor in adversary proceedings and other contested bankruptcy matters.



CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/11/2024

*Date*

/s/ Douglas Pick, 1743996

*Signature of Attorney*

Pick & Zabicki LLP

*Name of law firm*

369 Lexington Avenue  
12th Floor  
New York City, NY 10017

United States Bankruptcy Court  
Eastern District of New York

In re: Barbara J. Abadi

Case No.

Chapter 7

Debtor(s)

**Verification of Creditor Matrix**

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 07/11/2024

/s/ Barbara J. Abadi

Signature of Debtor

DocuSigned by:

Jennifer Polich

Signature of Joint Debtor

American Express  
200 Vesey Street  
New York, NY 10285

NYC Law Dept.  
100 Church Street  
New York, NY 10007

Brown Rudnick LLP  
7 Times Square  
New York, NY 10036

NYS Attorney General  
28 Liberty Street  
New York, NY 10005

Carlos Abadi  
3438 E. Lake Road  
Suite 14, Box 643  
Palm Harbor, FL 34685

NYS Dept. of Labor  
WA Harriman Campus  
Building 12, #256  
Albany, NY 12240

Conor and Eavan O'Driscoll  
355 Locust Avenue  
Rye, NY 10580

NYS Dept. of Taxation and Finance  
Bankruptcy/Special Procedures Section  
P.O. Box 5300  
Albany, NY 12205

Francis Guthman  
Buenos Aires, Argentina,

NYS Dept. of Taxation and Finance  
Bankruptcy/Special Procedures Section  
P.O. Box 5300  
Albany, NY 12205-0300

Honeedew Investing LLC  
c/o Medina Law Firm LLC  
641 Lexington Ave., 13th Fl.  
New York, NY 10022

NYS Unemployment Insurance Fund  
P.O. Box 551  
Albany, NY 12201

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Office of the U.S. Trustee  
201 Varick Street, Suite 1006  
New York, NY 10014

Jennifer Polich  
1457 East Lake Woodlands Pkwy  
New York, NY 10174

Pick & Zabicki LLP  
369 Lexington Avenue  
12th Floor  
New York, NY 10017

Liston Abramson LLP  
405 Lexington Avenue  
46th Floor  
New York, NY 10174

TD Bank Visa  
P.O. Box 100290  
Columbia, SC 29202

Mail Room  
3438 East Lake Road  
Suite 14  
Palm Harbor, FL 34685

U-Haul Moving & Storage  
11401 West Hills Bourough Ave.  
Tampa, FL 33635

Manhattan Mini Storage  
420 East 62nd Street  
New York, NY 10065

U.S. Dept. of Justice  
Box 55  
Washington, DC 20044

NYC Dept. of Finance  
66 John Street  
2nd Floor, Legal Dept.  
New York, NY 10038

United States Attorney  
One St. Andrews Plaza  
Claims Unit  
New York, NY 10007